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ABSTRACT

The Lekotek, a toylending library program for mentally retarded children which started in Sweden, has expanded to serve families with disabled children in Evanston, Illinois. The Lekotek procedure involves a parental interview to determine the child's needs and family visits in which a Lekotek leader has a one-hour session with the child and then with the family together. The Evanston library contains approximately 3,000 toys and materials in such areas as fine motor, gross motor, and infant stimulation. Other Lekotek functions include a parent support group and assistance to preschools in successful integration. The Lekotek is privately funded. (SW)

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LEKOTEK

Swedish Play Intervention for Handicapped Children

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"Lekotek" sounds like the name of a miracle fabric used to make parachutes, but in fact, it is part of a world wide system of play libraries for handicapped children. The word lekotek comes from the Scandinavian rootword "lek" meaning toy or play, and the Greek suffix "tek" that connotes library. Lending toys, however, is not the primary concern of Lekotek. To understand Lekotek, it is essential to describe its history and define the concept rather than to simply translate the word into English.

In the early 1960's in Sweden, there was a political/social decision to de-institutionalize large residential settings for the mentally retarded. It became a social policy to provide services for mentally retarded children within their home community and, whenever possible, to enable parents to care for their children at home.

Though parents had a great desire to help their children, they felt ill prepared and unable to know how to best meet the special needs of the child. Also, at that time a child had to wait until the age of four to receive special preschool training. The parents were left on their own during these beginning years.

In 1963, two women who were parents of children with special needs began to seek ways to help their children during their first formative years. These two women, Karin Stenland Junker and Evy Blid, felt that waiting until a child was four years old before providing help to the family was too late. They strongly felt that it was the first year of life that significantly determined later development and that intervention strategies must be part of a child's earliest experiences.

Both women were also intimately aware of the loneliness and isolation felt by the family of a handicapped child. It was important to them to make the child as much a part of the mainstream of society as possible.

Play was the most natural way to reach out to the child and family. Not only would play stimulate the development of different functions, but it would bring added joy and companionship into the child's life. This was the fertile thinking that resulted in the creation of Lekotek.

The first Lekotek, "Lekoteket pa Blockhusudden," was started in 1963 in Stockholm. Today Lekoteks are scattered throughout the countries of Scandinavia. Over the years they have grown and expanded, not just in number but also in philosophies and methods that reflect society's changes. Today Lekoteks in Scandinavia

provide services to all children with special needs, not just mentally retarded children. They are now a required part of the social welfare delivery system of both Norway and Sweden. All children and families with a special need are eligible for Lekotek services. Lekoteks are an important part of the team of professionals that provide service to the child and family.

Lekotek's therapeutic intervention program focuses on the family unit, not the child in isolation. The primary task is not to teach the child new finite skills, although this is a natural outcome of the process. The goal of Lekotek is to normalize and assimilate the child within the family and the family within society.

Play is the cornerstone. The program provides parents with the guidance and tools to help their child through play. Toys are the keys that activate the child's attention, but it is the quality of human interaction that makes the critical difference in the child's potential. Lekotek encourages and enhances this interactive process.

The handicapped child often does not spontaneously engage in play, but lies quietly in his crib. If such children are to develop, they must be stimulated, coaxed, even pushed into the world around them. Play is the essential humanizing ingredient.

Lekotek in Evanston

The first Lekotek in the U.S. was begun in Evanston, Illinois, in 1980. The original staff were American teachers of special education who trained in Norway and Sweden as Lekotek Leaders. Their strong desire to preserve the philosophy and the humanistic approach of Scandinavian Lekoteks remains true today.

The Evanston Lekotek serves the Chicago metropolitan area. The center is staffed by professionals in the field of special education and remediation, who are also trained in counseling techniques. Capacity for the site is 200 families. Any family with a disabled or handicapped child is eligible to use Lekotek. The disabilities can be either chronic or short-term. Most families coming to Lekotek, however, have children with long-term disabilities- cerebral palsy, Down's syndrome, childhood cancer, mental retardation, autism, or spina bifida.

The ages of the children range from birth to 12, with 80% of them under the age of five. In one case, an expectant mother initiated Lekotek's service prior to the birth of a child known to have Down's syndrome. Families are referred to the center through hospitals, clinics, doctors, schools, or other agencies. Some parents hear of Lekotek and come without a professional referral. Because the Lekotek concept is quite new to this country, there is a constant need to educate referring professionals to its function and value in the community.

Lekotek Procedure

Families come to Lekotek on an appointment basis, usually every three to four weeks. At the first appointment the parent(s) come without the child. This gives the parents the opportunity to establish a personal relationship with the Lekotek Leader and to freely discuss their child's needs. At Lekotek great emphasis is placed on the parent's perception of their own child; therefore, the information they give to the Lekotek Leader is regarded as useful and valuable.

Lekotek does not formally test or evaluate the child for several reasons. First, testing situations can be anxiety-provoking for both the child and parent. Second, testing information is available through the referral sources. Third, testing procedures are costly. Above all, Lekotek must be accepting, non-judgmental and supportative of the family. These attitudes can be difficult to maintain in a testing situation.

Following the parent interview, Lekotek makes contact with the referral source. A plan is made in coordination with other agencies that may be seeing the child or family.

The family then comes to the Lekotek on a regular basis. In some cases, such as a blind mother or a bedbound child, the Lekotek Leader will make home visits.

Family visits are one hour. Prior to the family's arrival, the Leader selects eight to 10 toys or educational materials. Each is chosen to meet a specific need of the child. For example, a four year old child with Down's syndrome may be working on fine motor coordination and color discrimination. The Lekotek Leader might select large holed lacing cards, color stacking/sorting toys and a play sewing basket that combines training skills, imagination and language opportunities.

During the session the Leader plays with the child, modeling for the parent positive play interactions. Then, the parent and the Leader play with the child together. They might also talk together about issues of concern or even chat casually about daily events. In many ways the Leader is a mother surrogate for the parent. She provides encouragement, empathy and advice (when asked for it!). The physical surroundings of the Lekotek are conducive to this feeling of warmth and acceptance.

Lekotek Library Materials

The library inventory consists of approximately 3,000 items. They are catalogued into 14 categories, for example: fine motor, gross motor, infant stimulation. Many Lekotek toys would not be available to parents because they are prohibitively expensive, imported from Scandinavian Lekoteks, specially adapted for handicapping conditions or sold only through professional catalogues. Lekotek, however, has a collection of toys that can be purchased at any good toy store.

This year's goal is to develop an inventory of toys and materials for the severely physically handicapped child. Very little is available to these children that they can operate, control or play with independently. Because of their impairment, many physically handicapped children have never experienced a cause/effect relationship with objects. Lekotek now has an inventory of electrical switches to accommodate most physically handicapped children, for example: sip-and-puff switches, head-nod and chin switches. These switches can be interchangeably connected by jacks to a variety of action toys. These toys have been adapted with battery packs to accept the electrical switches. Some examples of popular toys that are now available with switches are Fisher-Price's record player and Mattel's Jack-in-the-box. These same switches can also be connected to a microcomputer. The child can learn to operate a computer using the skills acquired through play. For the severely physically handicapped child, particularly a child with no language possibilities, a computer is an essential part of life and independence. Lekotek sees the early stimulation of play as part of the continuum of skills that lead to a child's future self-sufficiency.

The center also has a library of written materials available to parents. It includes books, newsletters, resource information and announcements of pertinent events.

Other Lekotek Functions

A parent support group with parents as the group leaders, meets once a month and is very well attended. For many of the parents, particularly parents of young children, this group has become an essential part of their coping strategies. The group loosely divides into two sub-groups, the parents of older children and parents of younger children. The parents of older children have consciously provided great practical, pragmatic and psychological support to the young parents.

The Lekotek assists preschools in the successful integration of children into the mainstream. Lekotek in Evanston conducts a preschool project modeled after a similar program in the Swedish Lekoteks. Children with developmental disabilities are mainstreamed into conventional nursery schools. Lekotek has a resource teacher who is responsible for the children while at school. Lekotek also supports the nursery school through a series of inservice programs, technical assistance and material loans.

Lekotek has contracted its services to various community agencies such as Visiting Nurses. In the case of the Visiting Nurses of Evanston, the Lekotek lends toys and therapeutic equipment that the agency can use in providing physical therapy and occupational therapy to their clients.

The Evanston center has provided guidance and training to a number of communities that are in the process of beginning Lekoteks. During 1981 Lekotek was funded to produce a film in conjunction with the Norwegian Lekoteks. The film, "Hidden in Play: Lekotek," has been extensively shown both in the U.S. and Europe. It has also won several major film awards and is available for anyone interested in the Lekotek concept.

Lekotek Funding

As a not-for-profit agency, Lekotek is governed by a volunteer Board of Directors and is entirely independent. Funding is acquired through grants from corporations, foundations, private donations, fees, fundraising events, and United Way. The center serves 200 families on a regular basis, as well as providing other adjunct services to children and families.

Originally, it would have been easier and far more economical if Lekotek had become part of an existing program that served handicapped children. This, however, was never a consideration of the original founders. It was strongly felt that the Lekotek approach needed independence to establish its credibility and feasibility in this country. Lekotek in Evanston has grown into a strong, innovative and valued service in its community. On the other hand, this independence is costly. Many of the expenses of running the service-telephone, space and utilities-could be minimized or absorbed if Lekotek were under the umbrella of another agency. Future Lekoteks would benefit by carefully weighing these factors when deciding how to organize a similar agency.

The Evanston Lekotek continues to be privately funded. Some attempts were made to seek government funding; however, after careful consideration, the Lekotek Board of Directors decided not to persue this option. Proposal preparation was prohibitive, but more importantly, government restrictions would have impaired the quality of service and the responsiveness to parents that the Lekotek now enjoys.

For the first ten years of their existence, the Lekoteks in Sweden, Norway and Denmark did not receive government funds. These Lekoteks grew and prospered through local support and involvement. This growth has been true at the Evanston site as well. Community support has been enthusiastic and generous, not only financially, but with donated services as well.

Lekotek Future

In Sweden Lekoteks grew rapidly. Within a few years many sites existed that called themselves Lekoteks. Many centers however were simply toy lending facilities. It was then decided that a set of standards had to be met in order for a site to call itself a Lekotek. The Lekotek leader training program was a direct result of this standardization. At present, in Sweden, advanced Lekotek training requires a year of academic work.

Lekotek in Evanston has received funding to develop a Lekotek leader training course. It is modeled after a similar course that is offered in Sweden; however, it is not as extensive and it requires considerably less time to complete. The course carries graduate credit and it is offered three times a year.

It is hoped that Lekotek will continue to occupy a leadership position in the preschool education and assimilation of the handicapped child. As in Sweden, Lekotek could provide extensive supportive services to private preschools and day-care centers. This would enable handicapped children to be mainstreamed at an age at which they are most likely to find success. It would also enhance the assimilation of the family as well as the child into the mainstream of society.

U.S. Toy Library Association

Although Toy Library Associations exist in 15 other nations, no such organization exists in the U.S. Lekotek has joined other play/toy libraries to establish a U.S. Toy Library Association. This organization will be affiliated with the International Association of Toy Libraries. The purpose of the Association is to educate the public on the value of play, stimulate the growth of play libraries for all children, provide pragmatic information on managing toy libraries, make available research on play materials and be a clearing house for information on the use of play to enhance child development. It is the hope that such an organized effort will result in a system of play/toy libraries in this country such as exists in Great Britain, Holland, Belgium, Canada and other nations of the world. The address of the U.S. Toy Library Association: 5940 West Touhy Avenue, Chicago, Illinois 60648.